PTO/SB/02LR (08-03)

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## **DECLARATION**

**LEGAL REPRESENTATIVES (35 U.S.C. 117)** Supplemental Sheet

Name of Legal Representative:	A petition has been filed for this non-signing legal representative					
Given Name (first and middle (if any))			Family Name or Surname			
JERRY WAYNE Notes JR			Noles			
Legal Representative's J. J. J. J. J. J. J. Signature			Date		Date /-	16-05
Residence: City Okemah State		OK Cou	intry USA	Citizenship	USA	
Mailing Address RT 4 Box 98A						
Mailing Address						
city OKEMAH			State OK	Zip 74859	Country	USA
Name of Additional Legal Representative, if any:  A petition has been filed for this non-signing legal representative						
Given Name (first and middle (if any))			Family Name or Surname			
Legal Representative's Signature						
			<u></u>			<del></del>
Residence: City		State	е	Country		Citizenship
		State	е	Country		Citizenship
Residence: City  Mailing Address  Mailing Address		State	В	Country		Citizenship
Mailing Address		State		Country	Country	Citizenship
Mailing Address  Mailing Address	if any	State	e			
Mailing Address  Mailing Address  City	if any:	State	e	Zip	-signing leg	
Mailing Address  Mailing Address  City  Name of Additional Legal Representative,	if any:	State	e	Zip s been filed for this non-	-signing leg	
Mailing Address  Mailing Address  City  Name of Additional Legal Representative,	if any:	State	e	Zip s been filed for this non-	-signing leg	
Mailing Address  Mailing Address  City  Name of Additional Legal Representative,  Given Name (first and middle (if any))  Legal Representative's	if any:	State	e A petition has	Zip s been filed for this non-	-signing leg	
Mailing Address  Mailing Address  City  Name of Additional Legal Representative,  Given Name (first and middle (if any))  Legal Representative's Signature	if any:	State	e A petition has	Zip s been filed for this non- Family Name or S	-signing leg	al representative
Mailing Address  Mailing Address  City  Name of Additional Legal Representative,  Given Name (first and middle (if any))  Legal Representative's Signature  Residence: City	if any:	State	e A petition has	Zip s been filed for this non- Family Name or S	-signing leg	al representative

This collection of information is required by 35 U.S.C. 117 and 37 CFR 1.42, 1.43, 1.63 and 1.64(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.